

Dr. M^r Clegg
Inflammation

We always find Inflammation in one of the three stages,

- 1st Adhesive, which is the most favourable, and known by the Itching and no fever. Should this go further, we have
- 2nd Suppuration, known by the severe throbbing pain, and the condition is considerably affected, pus (which is a peculiar ~~mat~~ fluid eminated from the blood vessels of a straw yellow colour full of globules, if the emination be weak we have a serous fluid if strong a dark blood-like fluid) thrown out. And then
- 3rd The ulcerative stage — "

Inflammation terminates by Resolution, Suppuration & Gangrene ^{ulceration}
The best to treat it by Poultices, bleeding, purging, low diet ^{then alternative} but rather stimulate if you wish suppuration to come on

Monday 14th Nov - 1825

Scofulous abscesses to be opened by carrying the lancet some way under the skin and little to be evacuated at a time, not allow the abscess to be exposed to the air, but poultice abscess of the thigh known by the fluctuation of pus; open poultice the opening over a wet blanquette

Tuesday 15th

It is probable that all a bœp that open into the abdomen are always open by sloughing or a species of mortification and not by suppuration.

The next kind of abscesses are blood abscesses to be treated as before. The abscesses that occur on the head of new born infants which sometimes produces a caries of the bone or dura mater to be treated by dissecting or as before mentioned in other abscesses. Not to be confounded with *lunula cerebri*.

Sub-cutaneous abscesses often considered scrofulous treated as above. Whitlow abscess of the hand the hand to be kept at rest as above — also known by the bulgy appearance of the back of the hand.

Thursday Wednesday 17th

Mammary abscesses apply emollient fomentations ^{or poultice} and not the cold applications, blood letting generally saline purgatives, keep the breast elevated and lie on the opposite side — terminate by Resolution or Suppuration to be opened in the most pending situation as above, then poultice the fistula causa perhaps by frequent irritation of an abscess, stimulants are to be applied, a corrosive subl. for 3 grs to an Ounce or Salt-Juice or Copper or Setons to be passed through the opening and a stimulant introduced by this means. Of sinuses also of abscesses require counter opening and require exposure and some stimulant — or ~~apply~~ introduce a silver probe immersed in Nitric acid — Anthrax or carbuncles known by great pain of a burning kind — ~~immovable~~ ^{immovable} ~~and~~ ^{and} ~~the~~ ^{the} condition is affected — treated by Antiseptic

D^r Mc C�lan Thursday 17th

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Anthrax always to be treated according to circumstances, and should it be necessary treat as in Syphocid.

Friday 18

Erysipelas a cutaneous inflammation confined to surface of the skin, the remedies to be directed to Stomach, 1st An Emetic or Tart Tart with Epsom Salts at the same time or immediately followed treated locally by foment or poultice of different kinds and kept moderately cool — The Thlegmonous Erysipelas with fever more considerable and the skin thickened, the worse form have blood contained the fluid to evacuate — The Constitution and treatment the most important, by the Antiphlogistic treatment we expect the greatest advantage — depletion to be practiced — poultices may do good in some cases — Warty solution of ^{opium} with lead a very good lotion, not to become dry — the strong Mucilage Riot or fresh Lead, sometimes very useful — Blisters just above the vesicles part — the Corrosive Sublimate sometimes useful — Edematous Vesicles common to enfeebled constitutions, any inflammation may substance may produce gangrene, not debilitate the constitution.

Monday 21st

Mortification of Dry or Chronic and Acute or moist — Of the result of Inflammation — And those which are not connected with inflammation — Of that which originate of Inflammation and it does sometimes originate from a healthy inflammation — Cause by too much stimulation from the inflammation — to be treated by lowering the action but not much to be done unless soothing pain and hastening sloughing by which the living parts take out the action of suppuration and ulceration but not frequent — Theumculus, Anthrax always terminate in Mortification — Erysipelas not often — Constitutional irritability are favourable to Mortification — Sometimes occurs Constitutionally and other times locally and this always favourable if proper treatment be applied, not an Antiphlogistic practice to be applied especially in cases of Stumps — but tonic and stimulating Antiphormedics as wine whey Rotten Egg &c and fermenting poultice Yeast — Rye flour and Honey sometimes a little warm water — sometimes little Spt Wine or Opium to be added (either the bark or Charcoal poultice) the above to every kind of Mortification — Burns and Cold sometimes induce this kind of Mortification especially if the natural temperature be too suddenly induced, neither induce the circulation in the part too soon — Spt of Camphor and Menthol to burns & of Turpentine — Those that do not result from inflammation as pressure or ligature or application of an artery in old age — two part of the same kind, in this no pain to be known by discolouration of the part and not returning the natural colour soon after removing the pressure &c in those cases prevent pressure in those parts, apply the Spt Minervi — first Camphor or Menthol a few while apply an adhesive plaster — from ligature, this seldom occurs in healthy constitution but be a

those of specified arteries there is little chance of curing. — Dr. McClellan 3
such as Potts Mortification of the toes &c, depend on an infec^ted circulation
treat by supporting the system some say by Opium alone or combined with Must
Camphor, volatile alkali &c Opium in a solid form — Locally, apply noblisters
and apply very little — Little to be done in Constitution modification
perhaps induced by some Cornutter used in Rye bread

Wednesday 22nd

Of Scrofula, The predisposition, are the complexion, eyes &c But
a relaxed state of the solids is the cause of Scrofula — the want of
tame, also — they are unable to bear so much labour or fatigue, the
cellular tissue also is very relaxed and easy produce discoloura-
tion from a slight blow &c — Some also suppose the fluid
likewise to be deficient in their Constituent — Scrofula, Heredi-
tary and Acquired — Bringing up children in an impoverished &
dirty manner and keeping the children very low will induce the
disease — And debilitate cellular tissue and the digestive organs, it
does not belong to the lymphatics as some say — but the solids, and fluids
Diet — Phaimaceous diet — no hot bread — no shortening — arrow root, Sago &c
Milk &c — laxatives not purgatives — Blue will 4 to 5 grs combined
1 or 2 grs Senna as an alternative occasionally a laxative of Rhei
et Magnesia, Cal — Or Senna & Manna & horoway seed — also the
aloes with aperienta &c

Local symptoms is first manifested in the Glands, often in the
bone-fibre, ligament tendon &c It first commences in the mesenteric
glands, known by enlargement &c — Thereafter the commencement is
not inflammation — the inside of a cheese-like substance, and
then a cold-like abcess — To be distinguished from Worms but the
treatment much the same, but ~~is not~~

Scrofula of the sympathetic Glands, not peculiar to this system;
no inflammation at first, but afterwards inflammation from pressure or other
causes, the system becomes irritated and sometimes produces Hæmorrhage —
Curdled like matter floating in fluids not always present —
Treatment, Constitutional treatment as above, not poultices only when
there is inflammation, generally stimulating plasters or fermentations
are to be applied —

Thursday —

They occur, under the peritoneal surface of the thorax and abdo-
men; this may be Constitutional Scrofula and never develop itself
for a whole life or result in Consumption — tumors become
abcesses in the lungs, or cavity of trachea and is thrown up by
expectoration, sometimes they close and do not effect the Constitu-
tion but not by granulation, but by ligamentous substance or abcess
or sinuses and causes the cough which often last for life; to be treated
as in Scrofula Hæmorrhage — this causes Empyema perhaps &c
Scrofula in the serous and lymphoid membranes, should the
secretion of matter be in the system the air to be applied

Scrofula. No sensible; perhaps calcareous. White swelling is often Scrofula, but not to be confounded with the inflammation. Treated occasionally alteratives purges, not much blood letting, unless few Colds according to inflammation.

Scrofula of the bones, generally all affected more or less, and become less solid and cause distortion &c — of the spine & limbs and to be treated as such — no depletion — generally as above by alterative, give tone to the system &c —

^{Friday} Where no caries or inflammation attends; but distortion of bones do not confine the patient by stays &c and give

Where there is Caries of any one bone, confine the patient &c to remove the inflammatory action excite ulceration or do it chemically supply some diluted Nitric Acid &c &c — it affects the eyes and every other portion of the body — Treated by Constitutional alteratives.

When Heretic Fever takes place from Scrofula, seldom takes place before the above different opinion whether before or afterwards, results from irritation from inflammation, different kinds in different cases.

2 Kinds, one of Scrofula known by well marked paroxysms diarrhoea at the end and copious night sweats — of other inflammations not so ^{similar} to the same kind of Antiphlogistic treatment will be borne in the Scrofulous Kind — Patients in Scrofulous Heretic seldom think themselves so ill as they really are — Treatment in the very commencement by Proper Nutritious diet as much as he can digest, state of the System to govern the exercise — free & deep of air which the fever shall be subdued, no exercise require so much change of clothes —

Few Medicines can be of use Antimonial to be given small quantities as one grain at a time in a pint of Water to be drunk immediately occasionally as an alterative not to have any immediate symptom or effect if to lay it aside — never be satisfied with reliefing the disease — The diet of ^{young} animals to be avoided choose the white meats &c —

Local remedies best red hot iron in Scrofula of the spine and bones — Next the Moctcha of the French Must, Sissoe or Siton — Poultices to keep up the discharge and cleanliness — no relief from internal remedies unless they be alteratives — Alteratives are Gola, Mercury, Arsenic, Silver &c &c all Quack Medicines act by their alterative effects.

Dr McClellan

Monday A.M. 28th

Of the Curved Spine, which of different Kind—
1st Curved Spine, 2nd Caries of the Spine where we always have Hectic fever and the distortion always confined to one place, different in the Curved Spine where there is a displacement of a great number of the vertebra, Curved is known by there being no pain, but much pain in case of caries, and always may be known by this — in the Curved sometimes you have a tiresome pain somewhat peculiar to this Curved species and almost always common to the female as a chronic disease. The Curved Spine caused by bad diet— confinement &c often it does not affect the general health — Treated as before by the mild laxatives — Alteratives, gentle exercise. Tonics, the Serofulous diet in proportion to the state of the digestive organs &c Position of the body, no confinement, or Machinery to be used — Exercise, nearly as possible in the erect Position to move about as great a length of time as possible, and lie down a short time several times a day merely to refresh them selves, horseback, carriage riding, And any exercise that will ^{bring} the body most into action is best — When it is of long standing no cure — Only when it is recent and owing to an affection of the general system, and this done by giving tone to the muscles, And using Friction of Salt on a towel, this the patient to do herself —

Of the Caries Spine or broken back, caused by a chronic Spine of Inflammation, perhaps always from Serofulous & and always evacuated at some time or other from the Ulcer attending, Hectic fever always occurs when the ulcer is opened and sometimes even before this is the case, but not all cases of caries of the Spine are attended by Hectic fever and these are the only cases that may be cured — Treated in addition to the general treatment the local one is — 1st Rest in the ^{posture} recumbent & this however only in cases of caries — 2nd Relieve the chronic inflammation by Caps to be repeated as often as pain returns, after relieving pain apply issuel either Caustic or the cautery for perhaps best Moxcha or Cautery this best where you cannot previously reduce inflammation —

Scrofula of the Joints or white Swelling; also of Necrosis
may be mistaken for Rheumatism - Treated generally as before
if it be the joint there must be rest by using a splint - Also
by Alteratives after Cuppings, And all Treatment as before
or as in Scrofula generally. —

Yester Day at 10^h 29th

Syphilis; divided into, True or Hunter's or Mercury most successful
in this - This of different symptom Primary & Secondary - Primary
symptoms affects some part of genital or even other places, this sym-
ptom is an Ulcer - of two kind the one on the ^{on the initial pruritus} Gland Peni, peculiar
an account of its hardness and surrounded by indurations while there
is not much inflammation - Not painful tho' not discharge goes -

When the indolent appearance goes away we may expect something
favourable and this is the only true chance -

When the Ulcer be on the lip it is ~~different~~ - And unhealthy
discharges of pus whether past the same on the Scrotum and dorsum of
penis -

Next to these Ulcers we have bubos in the Lym-
phatics; caused by Lymph or by the fluids, being in the course of the
veins from the Bladder - One gland only swells in the true
Ulcer or will be cured by Mercury, - it is an indolent disease -

Bubo of true Syphilis it has a dull aching pain and constant
the gland increases constantly until it breaks -

Of the Secondary symptoms, are an Ulcer in the throat, blotches on
the skin of a Copper Colour these are the first order - The sec-
ond order are the affection of the bones along the shaft of some
one of the long bone under the Periosteum this occurs in
the form of lumps, sometime affect the bones of the head &
never the joints - There are called Nodes - -

Treatment different in the different symptoms, - Primary chance
1st By light topical cleansing plasters, Mercury in small quantities not
to effect the system but the best to remove the existing symptoms, some
alterative in small quantities and others large - When there no Scrofula
and no irritation of the system give XV grs of Calomel 3 or 4 times at bed
time And you have a languid secretion of every part of the system. Mer-
cury acts upon the Capillaries & never and induces a different condi-
tion of the system - Working the part 3 or 4 times ^{day} & cover it by a
plaster of common Cerate, if it does well continue the mercury -
Avoid cold or cold water & the alterative course to be pursued
in feeble or Scrofulous, give by grs 1100m Calomel with Antimony as before
with a wash of Sulph 3 times but do not produce inflammation or blisters

not always necessary to use Mercury but may be taken by the Mouth
or Casting in small Chancres only or use local applications to
remove the Chancres

For the true Bubo Mercury by friction not so far as produce
Salivation, it will be of service in 3 or 4 times — If Friction
will not do we depend upon internal affects by Mercury taken
to purge — The limb to be kept at rest and the glands not
to be irritated — If much pain, Leech, then a blister to
be applied, after this a camphorated plaster — If suppuration
has commenced we may do well by this treatment but must
be opened by a large and free incision —

Treatment of Second-ary Symptoms, very easily done by Mercury
if it be a true venereal Ulcer; and no inflammation in this Ulcer
With a white pulpy surface, no pain in Swallowing in this
Ulcer — The blisters large, oblong, discoloured deeply, and
finally Ulcerate — The use of Sarsaparilla given with blue pills
of which 3 or 4 grs daily, free drinks of different teas, — a full
meatless Diet — generally cured in 2 weeks that is the last
symptom — discrimination the grand part

Of the bones cured slowly and only by a chronic course &
by Mercury in small doses of corrosive Subl. with ^{some} ^{some} Cicuta
affection of the bones, known by the nocturnal pain, it may not
always happen. Slovers powder at bed time corrosive Subl. 1/2
Cicuta griss three or four times a day — with plenty of drink
to keep up a constant insensible diaphoresis, sometimes
we must cover the Nodes by blister and relieve nocturnal
pain

Thursday Dec 1st

Syphilis, the secondary symptoms are as liable to happen to the Antecedents
as the true Syphilis

Syphilis of the Antice Kind called by Barwick the Scaly Syphilis

The Pustular venereal disease is the disease where the secondary

symptoms are of a Pustular Kind — The primary symptoms are Ulcer
in same situation as the true kind but of different from chancre
because they are soft instead of induration of their base and ~~are~~
the edges not elevated — These Ulcers are more irritable than
chancre or are more sore, inflammation more common to this than
to the chancre you may sometimes have common Ulcers and then
no constitutional affections —

Bubs more likely to occur in this than the true kind and
are perhaps syncoptic of the Ulcer, the Bubs not confined
to one gland only sometimes on one side or on both

may suppurate or be disceded - they break out in about the same time as before - The throat and skin break out in sores, but instead of the copper colour, we have small pustules or blisters, the throat sore and a difficulty of swallowing contrary to the true syphilis.

Last order of symptoms are no Nodes no nocturnal pains, they affect the Periosteum and not the bones as before, the constitutional affections not so severe, if no remedies used the disease would probable terminate favourable in 2 or 3 months and therefore a very mild disease and do not use too severe remedies Mercury not to be used in this disease, at least very rarely. It may be cured without Mercury.

Treatment, the primary ulcers to be cured by local remedies, perhaps bleed and cleanse the alimentary - If we doubt the kind of the disease use the yellow or black wash - the best Sulph of Copper 5-10 to 15 gr to $\frac{2}{3}$ j or Sulph Zinc not to be used while there is inflammation not induce it by these washes, use them once a day - When the ulcer cannot be covered by the pustule we must use some plaster or salve, use not irritating plaster where there is inflammation use common Cerate, if no inflammation the red Precip of Bubo to be treated as common glandular affection Mercury of no use but may do harm occasionally may do good, part to be kept at rest, use leeches, blood letting, and daily purgatives, not to sit at but confined to his back, do not use Plaster, until the inflammation shall have been subdued - always keep on a large Poultice and may be disceded in 4 or 5 weeks, the matter from a bubo is very innocent and not poisonous.

Secondary symptoms cured easily by some Antimonials and Sarsaparilla attending to diet. Clothing &c to keep up a gentle diaphoresis will generally be all that is required.

In affection of the bones to be cured by depletion & generally of a Rheumatic kind of pain &c.

The Papillary venereal disease - known by a discharge from the penis or as it is called Gonorrhœa we have in this disease ^{one} secondary symptoms similar to those ^{one} before secondary symptoms as the last - no ulcer in the throat but inflammation - the second day to be treated as before cure the sore on the ulcer by washing with soap and water no dressing - The discharge uncertain how soon may be cured

Dr. W. Clellan

Friday Dec 2nd

Gonorrhœa such as break out in a day or two after exposure we may expect a tolerable easy cure - but when it shall not break out before 4 or 5 weeks do not expect a cure too soon - The nature of this disease is infectious - The Gonorrhœa virilenta when it commences goes on rapidly, but the simple Gonorrhœa goes on more slowly -

Gonorrhœa virilenta infectious in this always as lame, in the early stages ^{some} may be said of Copaiava and other stimulants.

Treatment, for the first 8 or 10 day use simple unmedicis and cleanse the bowels. By this time you will know of what kind it is - If it be gonorrhœa virilenta local remedies of no use at all - When the glands in the Urethra shall enlarge you may know it to be virilenta - In both cases always bleed and reduce inflammation by Cola water & the ~~hot~~ penis kept erect - give laxatives, mucilaginous diet and drink if of a simple kind you have nearly cured the disease - but on the contrary if of the virilenta - In simple enjoy rest, abstinence of animal food no stimulants, laxatives, these are sufficient until the latter end of the disease

Of the simple kind, treatment ^{are} ~~of~~ ^{stimulants} ~~and other~~ ^{remedies} ~~remedies~~ - the infectious perhaps the best, of an slight attendant kind the very best - the sugar of Lead very injurious as an infection unless 5 or 6 grs of this with the same quantity of sulph of zinc to an Ounce - the next best is the Sulf of Zinc 2 or 3 grs to an Ounce ~~after~~ at first and increase to perhaps 10 or 12 - the Sulf Copper very good but must be much weaker - Oil of Vitriol very good after inflammation One drop to an Ounce of Water, after trying the above, sometimes infections do not answer and then diuretics. As Bals. Copaiava either pure or in combination if have 20 or 30 drops 3 times a day - Continue the infections or diuretics after the disease appears to be stopped - You may use the Bals of Canada or Spt Gaspentine - you may also use common Rosin - Also direct the patient to wash some time after you discharge him -

On Gonorrhœa vinulenta, first check Inflammation before you determine to treat for the last stage, if it should be 5 or 6 weeks from the commencement and after this is accomplished — you may treat as in the simple Gonorrhœa, mentioned before &c but if you treat too soon with emetics &c you may produce a troublesome gleet &c —

Hæmorrhœa testicularis or testicles enlarged may come by sunne or cold if the swelling be in Gonorrhœa, use rest, blood letting by leeches, elevate the scrotum — emollient fomentations or poultices to reduce pain and swelling and generally cures it in a few days — testiculæ do not require severe cathartics in the last stage, but light laxatives as Magnesia the very best in all diseases of the organs —

Enlarged Glands under the Urethra often ~~supp~~ ^{supp}ate suppurate in Gonorrhœa vinulenta you must use Mercury largely, sometimes there will an opening into the Urethra by which the urine passes out &c — locally apply Mercury — at the same time a large laugier

Monday Dec 5th

Phagedenies, the dys ^{syph} ptoms of two kinds, the lecor ^{day} ~~do not~~ invariably occur with a bulb involving, the worst kind and most fatal, begins in various, the worst begins in a sloughing ulcer sometimes by a slow Phagedenic Ulcer and is very liable to be mistaken for Syphilis of a different kind — the generally affect the Surface Mucous — of 3 kinds of progress, the last kind appears as if it was erecting at one end and progressing at the other end of the ulcer — (the first begins male and extends very fast whether on the gland penis or prepuce, and destroys it —) to reduce the symptoms of inflammation by bleeding, parts kept cold, bowels evacuated — next apply the undiluted Nitric Acid or some active caustic and check Mortification, surround the edge of the ulcer by luzilicon Ointment, with a piece of lint immersed in Nitric Acid and apply it carefully — after wards apply a poultice the same mode may be pursued in the other two kinds of this disease, as before reduce first inflammation by Antiphlogistics and after wards apply the Nitric acid and you generally have a cure in the

first symptoms, Of the Secondary symptoms, bubo in several Gland,
treated as before, the tobacco ointment also to be used with the best
effects in the bubos — Mercury may be used in some circumstances —
Secondary form — the throat the first affected skin bones afterward
does not often happen in the throat if it does occur may do good by blister
and Moxa etc as before — The fumigation of Mercury for the affection
of the skin and throat — Skin affected in the form of tubercles or blotched
and break out and increase sometimes we have Phagedenic
ulcers after the tubercles with a long train of anomalous symptoms
with the affection of the bones and the periosteum is enlarged, the bone,
likely to become carious treated by $\frac{1}{5}$ gr of Muriate of Gold with 20 gr
of bicarbonate 3 times a day, ulcer by a poultice of Carol — Kept a cut &c
with burning the Phagedenic ulcer &c

Tuesday Dec 6th

Anomalous diseases of the head eye, nose &c many months, or years
after Syphilis, no one Medicine can be considered as specific
Soluble solution for thickening of the membrane of the nose — A
nice good generally in these anomalous appearances also the San
sopapilla; with grs corrosive sublimate to a pint of Sarsaparilla
wine glass full 3 times a day &c

Thursday Dec 8th

Of Wounds of Lacerated — Contused and Gun shot — Incised, punctured — Incised wound by division by a sharp instrument and easily healed — Lacerated next easy to cure and treated as incised — Contused, bruised difficult — require suppuration before healing — Puncture generally produce deep seated inflammation and an abscess formed, constitutional irritation very apt to occur of the nerves and cellular tissue and allowing air into them — Gun shot wound often have foreign bodies lodged in them — also much sloughing from the parietes of the cavity of the ball — Union the first intention by Mr Hunter, done by adhesive inflammation &c. Mr Bellamy needles to be used in wound of the face eye lids &c, strips to be used as may be best &c On the act of dressing incised wounds, in sticking begin the angles and not too tight — and with the interrupted suture — not cover the suture by the strips — treat lacerated wounds as incised over by poultices contoured by poultices

Friday Dec 9th

Punctured Wounds, abscesses very like to occur from this kind of wounds to avoid this disrupt the tumour no incision required immediately - It leaves the cellular tissue exposed and therefore carterise the punctured part - as lunar caustic - after punctured wounds purgative remove inflammation of an tetanic kind treat by stimulants and purgatives daily as Senna & Manna stimulants - Camphorates, Wine &c -

In deep seated punctures apply lead water with Poultices espourest with Antiphlogistics - when foreign bodies are carried in, then will be an abscess
Gun Shot Wounds - no dilatation required - balls &c will generally be sloughed off by poultices and by other general principles, by bleeding, purging, discutents, unless it be in some vital part

Monday Dec 12th

Wounds of the head, generally lacerated, treated as incised or as lacerated wounds of the other parts, remove all hair from the interior of the wound, not often require poultices - if the bone be chipped smooth it off or take it away, Contused wounds require shaving the hair and suppuration - poultices and heals by granulations - If arteries are divided does not generally require ligature, Wounds of the Eye Lids, require sutures of fine kind

Wounds of the throat - do not treat as on other parts of the body by closing &c or by keeping the head very much flexed by a bandage, or a stitch through the common integuments only, with bandages as may be required - if the Pharynx is divided introduce a tube

Wounds of the Chest - treat on general principles - but to be closed as soon as possible

Tuesday

Wounds of the JointsThursday Dec 15th

Surgical Wounds of the head - Often cause inflammation of the brain &c either by some tissue as nerve or by contiguous inflammation - be guided of your Prognosis
Of Fractures of the bone, never Siphine unless the brain is injured, known by compression - Cut away the hair exposing the wound by separating the surface of the bone not cutting too much of the Pericranium only as far as the bone is injured, then where you intend to apply the Siphine remove the pericranium and make a hole in the sound bone to be able to introduce the elevator and thereby remove the fractured part of the bone which may often be done without any Siphining - The Siphine should extend as little over the fracture as possible - the Lenticulars of no use - not always necessary to remove all the fractured parts where they may lie

Dr. W. Collier Dec 16th

Injuries of the Brain; or Concussion of the Brain or as some say a contusion
The simple Head, when there is only a dizziness and no fracture had results happen.
The more severe kinds, require great care; the pupil of the eye stationary, muscular system in action, pulse may be ^{quick} slow and tense, until reaction take place — usually ^{quick} compunction take place — occasionally compunction take place immediately after the symptoms of ~~compunction~~ Concussion and often difficult to decide which it may be — but Compunction known by enlarged pupil and immovable muscles loose their action and easy pulse voluminous, slow, distinct of 40 Min or as a man dead, account — indeed often confounded with intoxication, here you had ^{for} better wait a while — consequences from Concussion inflammation of the brain or ^{inflammation} Treatment — bleed and do not allow the pulse to rise above the common standard or was not so high, cold applications, head raised, and at rest — purging &c, if compunction appears to come on, bleed largely, not allow him to be grooved, Leeching, cupping, purging &c. Monday Dec 20th

Compunction ^{caused} by a rupture of some large vessel, known by the symptoms not comming on for some time after the effect of Concussion, and 1st When some of the fine vessels between bone and the Dura Mater or the plates, 2nd between the membranes — and 3rd In the substance of the brain. Relief only can be afforded from the first of these causes — Known by the symptoms of Compunction come on some time after concussion, the locality of the collected blood is known by a great soreness of the place and the peri cranium detatched over the part — and if the rasping up the peri cranium is does not bleed — but all these symptoms do not often happen at the same time — Compunction sometimes takes place from collections of Matter come on by Varicose and Distressed and then ring back compunctions to be Treated by Antiphlogistics if it can be borne as they are often of a Typhoid nature — depend more on external ^{irritation} ^{application} Cupping — Leeching — perhaps Counteries or Moxa very good by exciting suppuration externally — no relief from an operation only when after cutting away the scalp you find the bone black and cut away the diseased bone — Of a Fungus growth from a blow, generally shooting out from the Dura Mater where there had been no fracture or where there have been and have been dephined or elevated, different opinions for the causes

Painful affection of some part of body Tuesday Dec 21st shooting pains from one part to another.

Hemicrania a common headache, not however the same as from arrangement of the stomach &c but from different causes arrangement of the hepatic system or derangements of the nervous system as in Hydrocephalus sometimes conic or a worm spot in the head - Treated generally, purge and by nervous sedatives narcotic &c

Those resembling Rheumatism or even complicated with but of the same kind and caused by cold, accompanied by heat and fever tamefaction &c

Neuralgia of the shooting kind, See Dolores or by the very worst form of

this disease and having ^a complete intermissions - owing to various causes as primary diseases of the brain and here the eye is spasmodic and vision often effected and the mind is effected pain in other parts, sometimes ear, tongue &c ~~be~~ left to wait until a see if the brain is effected - remedies to be directed to the brain as bleeding, purging, local applications only to indicate if it be in the brain generally die by convulsions - these diseases of ten complicated with Hemicrania &c &c

the next form is when it depends on an inflammation of the nerves and to be hardened - Caused by wounds, rheumatism, accompanied by great pain to the touch, sometimes great swelling of the part - generally only a redness, paroxysms of muscles of the part to which the nerves go, being irritable and rigid - great pain on coughing and sneezing - Requiring the Antiphlogistic remedies

Other remedies to injuries - cups and leeches with ~~bleeding~~ ^{to} bleeding, very low diet - blisters, setons &c no much harm - After you subdue inflammation you may treat as may be required &c - Take care that this practice is not applied any other form of diseases -

There is another form where there is no inflammation, being a derangement of the nervous system, known by the state of the system, pulse generally weak, gapeous or soap bubble and will not bear pressure on the artery - the part is not intermittingly painful - cold, diminished sensibility, the intermission between the paroxysms are very complete - Mercuric service treatment the best with narcotics - as Marmonia and Belladonna - Treatment first correct the state of system, then such remedies as act on the nervous system as Ext. 4 Belladonna and Marmonia of 2 drs & $\frac{1}{4}$ repeated 3 or 4 hours, Belladonna larger doses sometimes larger up to 30 or 40 with Calomel as generally prescribed Salomel grs 15 to 5 - Ext. Bellad. grs 15 - Discontinue the remedy when the gums become affected - some resort to other tonics, as bark & iron &c or Quinine - The true Oxide of Iron should be fine heavy powders - that which we get in the shops is very impure, Pure bark of iron alone 20 or 30 grs &c

A knocked tooth May cause Neuralgia, this does not so often happen as has
been supposed — usually the knock of the tooth is inflamed and has been
painful a long time before the Neuralgic pain — if it be the tooth it
must be extracted — also

must be removed ~~as~~ ^{as} Foreign Bodies ^{lodged} in the neighbourhood of the nerve; as I shot for instance
great ^{by} & shooting the shot if this cannot be - bleed apply Mota, and cause
suppuration and thereby you will often relieve the irritation - -
may also be cured by ~~the~~ pieces of fractured bones - and different others &c

Thursday Dec 22nd

The Operation for dividing the nerves, may be but of little use as the pain will gradually return and only to be done in extreme cases, if it is done we ought to have a deafness, — the branches of the fifth pair — neuralgia often complicated with variety of different effects — as hemiplegia &c and therefore cannot be classed nosologically — Friday Dec 23rd

The Mota for applying it, roll up the cotton in a long roll covered by linen so that a considerable quantity may be in a small space and sticked, this applied to the part by a pair of small forceps, and fire set to it the ^{ouge} of the Mota is increased by the common blow pipe — Some impregnate the Cotton by Nitre and then you will require a rag or paper with a hole cut through it and surround it so that the heat and sparks are confined to the part — the cotton is better when baked in a stove almost to a tinder — It is said besides, the Caloric that evolved from the Mota, electricity as is given to the Nerves which sometimes is of importance, for this purpose it should be applied over the Nerve it not over the Nerve may be of use on the principle of Counter irritation — Aqua Ammonia to be used to relieve excessive pain but unless pain from the Mota ~~is~~ very great the Aqua Ammonia is not to be used, as after this suppuration will not follow so readily the end of the Mota not against the skin is to light, but blow it through with the blow pipe — To be used in Headach, Neuralgia, Neuralgia ^{Neuralgia} &c but it does not allay pain of inflammation of the nerves — to be used on the same principle as the red hot iron — It may be usefull to all the organs of sense —

Diseases of the Ear, are very numerous, and very little attended to because we do not understand the principle of hearing — for sometimes the tympanum and bones are destroyed by ulceration and still there is hearing — the only one now believed is the vibratory or vibration of sound —

Lesions of the External Ear in Wounds stich entirely through the substance - and not only through the thin skin only, and very difficult in collecting sounds or air for vibrations - and for sympathy - (Look at Mr Swarts paper) - The Meatus auditorius liable to many disease and the first is, it being closed by a false membrane, if it be external may be cut away &c - if may be at the bony bottom near the tympani - or Dr Mc C. thinks, it to be a thickening of the Amnibrani tympani - to cut it away is said to be dangerous, when the tympani is thickened may be seen opaque in a strong light - a strong solution Lunar Caustic has been used with advantage by its eating and thinning it away -

Also a diminution of the size Meatus, even so that a probe cannot, perhaps be introduced - may depend on a determination of blood to the head - over come this and introduce small tents and allow them to remain, is the only treatment - or even a little lunar Caustic diluted - but no very great benefit derived -

But more commonly obstructed by Wart, and causes deafness common to old people from 60 to 80 years - to be extracted by probes and to be softened down by injections of warm Water and Milk - frequently the wart is in small quantities and not easily discovered, these are difficult to remove first moisten the part by some Animal Oil not vegetable Oil to remain an over night and syringe it out in the Morning with soft Soap and water a very small Silver wire to be used as a probe -

To relieve Hoarses of the Ear to be treated as Hoarses in other parts common Sulphur at bed time warm tea all to produce perspiration - Locality, Solution of Coros sub gft to and 3 - Blue Ointment best is Nitrate of Silver - Castile Soap a very necessary part of the treatment - it require counter irritation in the neighborhood - A suppuration or Ulceration of the ear very troublesome throughout life Treat by Alterative with laxatives a lotion to the nape of the Neck - farinaceous - then Solution of the Nitrate of Silver. gtt to a Dounce and cleanse the ear with ~~Castile~~ Castile Soap as a wash -

Dr Mc Clellan Dec 27th

Polypos excrestences in the meatus auditorius follow a discharge of the ear - keep an issue by ~~you~~ applying larva caustic

Diseases of the Tympanum and cells mastoidi - or middle ear - rarae
is the inflammation of the living membrane of the Eustachian tube -
and may obtrude in the obstruction of the passage to the throat - Capi-
ping - Bleeding, leeches & low diet - Blister and emrocations do
harm - From neglect you a collection of matter of a puru-
lent kind - producing Stomachion because it cannot pass to
the throat - (Scamanders on the ear) to be evacuated imme-
diately not to be left to nature - sometimes the bones will decay and be
thrown off - to prevent this evacuate it by making an incision in
the Membrane of Tympanum, first ~~matter~~ cleansing the ear
by a syringe and taking out the hair, and then straightening the ear and the rays
of the sun into the ear - or introduce a polished probe, then plane
stone at the inferior portion - then subdue inflammation, apply over
the ear a roasted Onion, pungative, antiphlogistic - if a Blister at
to the back of the neck - but a Leton on the neck of the neck
is the very best of all remedies - (An Injet of Argentum Nitrate
for the great feto of those you cannot cure - do not always
terminate in suppuration - sometimes the Eustachian tubes are
closed - & the often take place from diseases of the throat -
as the size of the aperture is either closed or pressed upon - occasion-
ally the middle ear is cut off from the ~~exterior~~ atmosphere
and here nothing will be of use but an operation which is
seldom successful - The operation of Trephining the mastoid
portion of the temporal bone - and exposing the middle ear to a
the exterior air - Or introduce a probe through the nose
but of very little use or none at all -

Diseases of the Labyrinths of Ear - pycnalis of the side of the, ringing
sound - but these are incurable - Or there may be a disease of
the nerve auditorium - tonics as Iron, bark, blisters, Moxa & friction
with Salt, Zephantine

Leucups may occur from some fevers than Mercury to be ad-
ministered — Wednesday Dec 28th

Diseases of the Nose and throat — of the nose, from fever in-
tions for ulcerations — also of the Syphilitic form, Arsenic or Mercury
as an alterative $\frac{1}{2}$ gr for a dose not to irritate the patient
or a secon or an issue in the nostril hood of the neck or nose.
or the mouth —

Ozena owing to Scrofula — The decoction of the Woods or Lisbon diet
with small doses of Corrosive Sublimate, arachic as a wash, but of
all is oil of roated cheese — but at last do as little as possible
as it only does harm —

A Thickening of the Living Membrane, might be mistaken for
polypi — the same as a chronic Inflammation, let it go on, there
is no danger — active depletion, purgative, low diet, exciting
transpiration — it is often on the lower spongy bone —
difference from a polypus as it is firm to the bone and hard, little
inflammation — A polypus moveable and varies in sizes and
is soft, looks much like an oyster in appearance and is always
on the external ~~sides~~ ^{parts} of the nose, and may be extracted
by the Polypus forceps but the bones not to be bruised or torn.
or to be extracted by the wire, if too far back for the forceps, and to be
taken out of the mouth and attach a sponge to a string fasten-
ed to the wire and taken out of the nose, and by pulling the
sponge through the nose the polypus will follow or ^{be} easily
taken out — sometimes you will not succeed, powder of blood
root with white vitriol may cure it ~~as~~ as an ~~escharotic~~ escharotic
3 parts of blood root and one part white vitriol — Hydriam of Potash
said to have done great good — or other escharotics — to be dry
fed up the nostrils — In malignant Polypi only palliated

Thursday Dec 29th

Diseases of the Tonsils, are of great variety — as inflammations with
the surrounding mucous membrane more than any other part, as it is
the cellular sub mucous cellular substance — they are not always on the

tonsils themselves — but often in surrounding circumstances situation treatment, active depletion, even to fainting, blisters and quarens do harm; — gauges often do injury, — if any is used cold water only — when you wish to evacuate the pus do not cut through the hard part of the palate — they ought to be generally laid open but be careful in your examinations and operations.

Sometimes there is a Chronic Inflammation, caused by concretions and pieces of food, lodged in the saddle-like holes of the glands being compared to a pepper-box — then to be taken out by a probe

Ulcers — from scrofulous, syphilitic, bad state of the stomach &c
correcting these compose the treatment —

Cancerous — tonsil slightly enlarged, livid or lead-like colour extending above the throat, stiffness, shooting pains and varicose veins of the mucous membrane — nothing done by an operation but, palliate strict diet, weak solution of corrosive sub-3 grs to an 3 of water for a wash — Cicta & never cured —

Tonsils enlarged in Scrofulous — in children; known by nothing being much at night, no pain unless inflammation is present, not an operation until it ^{be} too large, or you have failed in overcoming the scrofulous affection — if you operate, do it with the hook and knife and clip off a portion of it and let the cheese like substance pass out — in these operations pass the fingers ^{and cause gagging} down

Enlarged Tonsils from frequently repeated inflammations, and sore throat — rarely to be cut out as hemorrhage will ensue but from wire and double canula better than the silver wire, frequent by tightening it — or it being pinched tightly several hours and may sometimes be taken off — it will generally pass off in 24 hours — is very painful — There is an enlargement from the use of Mercury because the

Mercury was of no use, not being of a very true case of
realy general disease — extracted by the wire — as above — the last

Saturday Dec 31

Ways of the Antum Heymonianum &c

Tumors under the tongue, owing to the obstruction of the holes - lancing not sufficient or even probing - but cut the tumor with a hook and cut off as much as you can with a pair of scissoes which the very best remedy - Letons &c of little use as it will return - Generally in children the tumors often extend more below the chin than in the mouth - but do not lance it under the chin as it will leave a fistulous opening, be careful always to make the opening in the mouth - Called, Ramula (or soft Cancer)

Salivary Fistula, of the Parotid duct - Setons from the external orifice by a thread obliquely through into the mouth - this very difficult to cure, if this cannot be done you must destroy the functions of the Glands by pressure

Enlarged Sub Lingual Glands under tongue often interrupt articulation &c

Monday Jan'y 2 1826

Osteo Parca, fleshy tumors growing from the bones or the bone being converted into a fleshy tumor, of two kinds one of the living Membrane the other of the Perios team it is generally found to be a Medullary tumor or a soft Cancer formed in the fibrous Membrane, it will always ~~be~~ originate without inflammation thus being no fluctuation; there is perhaps a constitutional disposition to this soft Cancer and all parts of the body is liable to it, and in operating for tumors we should be carefull whether it is of this kind or not - The eye chiefly the seat of this disease, and success more likely to follow the extirpation than when in any other situation, to be distinguished from Carsi Noma as they are ~~so~~ much alike, at first looks like cataract afterwards a dark tumor arises containing a chalk like substance

Dr McBellian Tuesday January 3rd 1826

Scirrho Cancer, common to the ^{and this the only part of the face} lower lip and the female breast in the lip he first feels a lump or seal which he often picks off after some time he feels a lancinating pain shooting and ulcerating pains external and internal - there are sometimes two or three tumors and an Icterus matter passes through an opening or can deform excrencies, wated edges - small sinuses - it may under the angle of the lower jaw - seldom happen in any other situations than those mentioned - sometimes the edges excreted at others inverted - the Penis, the os Uteri sometimes affected - the discharge never purulent but serous with little blood. Small very offensive small watery Icterus discharge - sometimes in ^{the} ears of the ^{lips} may be discharged - the internal part when cut open appears to be divided ^{by} pettitions known by the name of roots, at least 10 called ^{so} by the vulgar - the glands in the nabone hood secondarily irritated or inflamed - and a ^{we} here may apprehend great danger from an operation unless you remove the glands, that is, the disease likely to return -

there many affections of the face, supposed to be cancerous but may have a suspicious aspect but never result in true cancer unless the it be in the lower lip - sometimes extends like Phage - derive ulcer &c but then are not cancerous - sometimes you a number of bluish spots which ulcerate and discharge then heal up, then thought to be cancerous, happens on any part of the body - but then are not cancerous.

The Scirrus and Medullary Cancer, of the female breast - the true cancer never occur until after about 35 years of age, Many tumors do occur before this some also require to be extracted for safety &c there are a great variety of tumors at all ages these to be looked too, but not cancerous

They sometimes ulcerate and subside by suppuration —
May be owing to some disease of the general system or Catarrh
Treatment, alterative, laxatives, rest, no pressure unless you wish
to remove the breast by this mean — no irritating or stimulating
applications to the part — but perhaps Lead water &c &c
Avoid every thing that may possibly prove injurious &c &c
If you cannot remove it any other way operate by taking
out the axillary tumor only — Cut down to the tumor apply
a hook and you will easily be get it out &c but
first give all the remedies a fair trial —

True Cancer ^{of the breast}, require different treatment, the constitution will
be emaciated and hollow — the breast hard, retracted and sunk —
Glands in the axilla enlarged — and always occurs in the decline
of life — first cut away away the hair of the axilla — then cut
from the lower portion obliquely to the axilla, then one above
to correspond with the one below — then expose the pectoralis
Major and remove the enlarged glands ^{with the finger} and burrow under
the gland and it is easily removed &c —
To dress apply a suture, strips & bandage & scarcely any blood vessels re-
quired to be tied unless profuse bleeding — then a ligature with
a half knot ~~and soon to be taken off~~ — the arm to be
bound tight to the body — the patient to lie on the opposite
side or back &c

Thursday January 5th

A Great ^{number} of Medullary and Scirrhus tumor, but all of the same
one or the other of these two kinds and no other &c — but are
specific —

Operation for Cancer of the lip — wounds heal dif-
fently in different countries as in Egypt they heal
much sooner — if the system is able to bear
the operation and surgeon can remove all the
disease — he then is justifiable in performing
the operation — & but where there is danger
of death from other causes, never perform the
operation &c —

Make a V. like incision and dissect it down and extract the tumor and much of the parts as may be required & Carry the incision ~~down~~ to the angle of the jaw. &c And close it with the interrupted or twisted Suture &c - If necessary a portion of the lower jaw may be removed.

Friday 6th January

In extracting the lower jaw - the Carotid artery is not to be tied previous to operating as recommended by some Surgeons &c. Harelip; sometimes the jaw is divided more or less in one or two places — the bottom of bone to be pushed back to a level with the other teeth, the edges to be pared away by a pair of Scissors, but not too obtuse above, to be carried up into the nose so that they may be drawn together with more neatness &c. But the hare lip pierces the Nipples to be extracted in 48 hours or may be 3 hours, the Nipples before inserted before inserting them — threads of the Suture to be left &c —

Or perhaps best to use the interrupted Suture inside the lip and adhesive plaster on the outside, instead of the twisted Suture formerly recommended &c —

Saturday

or malignant or true Cancer

Carcinoma of the eye; or Cancer of two kinds, all to be treated in the same way, sometimes passes into the nose and other parts — the operations are all uncertain, little to be judged from an external examination, as sometimes the external parts are little affected and the internal parts may be very much affected — to extract the eye — introduce the Bistury at the internal canthus and divide the nerves and muscles here, then by one incision above and one below and the eye is out — then introduce a ^{small piece} sponge and pass the lid over it and it will stop the hemorrhage and as the sponge is sent out, the parts will be filled up by granulations.

Bronchotomy - Laryngotomy &c -

To relieve those who are ~~choaking~~ from foreign bodies in the glottis and suspending respiration - or tumours in these parts causing the same obstruction or in spasmodic contraction from different causes - also from Inflammation as Croup &c - (Croup of a true kind occurs only in children) Laryngeal Larynges, also require it - (this occurs in adults) also may operate for Resuscitation - but first close the nose and prop upon the Ponsum Adami, and a pair of bellowses introduced into the mouth and you may inflate the lungs this way - if this cannot succeed you may then perform the operation - where the parts are too much swollen do not perform the operation - but introduce catheter - Operation to be performed between the thyroid and cricoid Cartilages - make a straight incision through the skin, and then dissect carefully down to the Crico-thyroid Cartilage - then a transverse or straight incision through the Cartilage straight when you wish to remove any foreign body - but you if you wish to relieve then the transverse incision as then the tube will be easier introduced - some say hook of wire (or suspender spring wire) instead of the tube, these best for children - Laryngotomy ought to be preferred &c

Monday January 9th 1826

Introducing tubes in the Larynx through the nose pull out the tongue & pull the head forwards, the tube being curved but it is a difficult operation - Most frequently the foreign body is lodged in the Pharynx - very often may be taken out by the fingers of the operator in examining the part this should always be attempted before a probang is introduced, if you can only feel it with the end of the finger use a pair of forceps

Dr

McClellan

If however you do not succeed in this way you must throw the head back and introduce the probang, but this only when it is low down and after you have tried the effect of a pretty powerful emetic as this has often succeeded &c -

Introduction of a large catheter into the Stomach to remove poisonous liquor or Contents; The head to be thrown as far back as possible and the tube to be thrust down in a straight line aided by the finger, and then throw in warm water or water and milk. And then turn the patient over on the abdomen and the contents will be thrown out without any other effort - if not to be thrown out by the syringe - we may tickle the fauces and this may often succeed beyond all our expectations; this to be done before you introduce the Stomach catheter

Tuesday January 16th

Tumors - Steatomatos - Scirrhus, and Incisted

The Steatomatos or fatty tumours immediately under the skin insensible to touch, of a fatty feel - we must operate when they are so large as to become inconvenient and can only be removed by aspiration, the whole part to be removed and not allow any part to remain or it will return, the incision to be elliptical divide the integuments down to the tumour and use no other instruments than a scalpel and your fingers - like scirr^o cancer

Cancerous, difficult to decide from an enlarged gland of the Lymphatics - known by the peculiar inflammation of the skin over the top of the sternum (like the common nodes)

Incisted tumours - when they come to prove an inveterate disease in the neck often the confluent with bronchocel

Perhaps there are several disorders (of an interesting nature)

Wednesday Aug 10th

Aneurism from may different causes as violence or a disease of the interior of the artery and these generally occur in the male between 35 to 50 years of age — first from dilatation of the artery and more likely to be in the aorta — if very large you find a tumour of a pulsatory and will protrude near the sternum or between the ribs or they are absorbed by pressure — the ~~coat~~ parts between the cavity and the external parts are very much thickened (a very interesting subject at present) bleed, rest — low diet &c in all that can be done (an operation) — but never coagulate in mere dilatation of the artery, most generally however the internal and middle coat rupture — Known, by a thrilling or aneurismal pulse also strong and hard — this also common to dilatations of heart &c —

Treat by — bleed every 3 or 4 days in small quantities from 6 to 10 $\frac{2}{3}$ — low diet of a thin vegetable & watery — laxatives nearly daily — rest absolute by sitting or lying down — this treatment to be continued a long time at a month or two or 4 or 5 months — and then gradually allow him to return to his former habits. —

Thursday Aug 12th
When the tumour extends ^{the surface of mucous membrane} ~~inwards~~ ^{over the tumour}, the aneurism bursts by sloughing, if pressure could be applied, it could be of service, but apply it over the artery, between the tumour and the heart, sometimes there will be no pulsation owing to the granulations — An operation, only an assistance to the remedies already mentioned — if it is performed better wait a while before it is performed — if the tumour becomes indolent it does not require an operation.

Aneurism of the Carotid Artery — The artery near the sternum mastoid — the Omo Hypoides closes the artery — and here the incision is to be made and the ligature to be passed around by

a probe or needle the artery not be inulated by passing handle of the knife under it.

Innominate - just above the Sternum deep seated &c

Thursday & Friday

Of Aneurism of different other parts &c

Monday sunny

Aneurisms from wounds of the occident arteries from accident - require to be cut down to the artery & apply a ligature above and below the tumour, the arteries will be found healthy and blood thrown into the cellular substance which forms the sac - More danger of mortification in ablation of this kind of Operations than in Cures of true Aneurisms because here the collateral branches are ready to convey the blood - You must therefore endeavour to keep up the circulation through the limb as much as possible - Aneurisms formed sometimes from fractures of the limb or strains &c and require to be cut down to and examined &c -

Ammputations -

of the Metatarsals of the Toes - which various causes will occasionally demand as tumors - necrosis &c of the parts the Metatarsal bone and Phalanges are to be taken away two in incisions one above and one below carried back to an acute angle disarticulate the joint and may be easily then separated by the knife after this apply adhesive strips &c arteries to be tied &c as may be required - no deformity but a narrowing of the foot &c

Of the foot — & the cure very much expedited by dissecting
Leg with two bones
up a flap of skin and a cushion of muscles. — the cir-
cular incision entirely around the limb (or the old plan)
is the best — the bone to be taken off below the
insertion of the ligaments of the patella. — the tibia and
Fibula to be divided exactly of the same length — the
arteries then to be secured — no cellular substance, veins
nerves to be included in the ligature which is always
the cause of so much pain and trouble — the lost
parts brought together from side to side, leaving the liga-
tures out at the lower end of the Orifice — marrow strips
short — and light dressings, no tow —
use no torquett but use a silk handkerchief &c —

Of the thigh — for making the lateral flap — make an incision
from the top of the bone to the bottom — one on each side
of the bone, the incision slanting downwards is the
best — &c — of the circumstances which require an op-
eration different questions arise — first — Is an operation
to be performed? — 2nd How? and is the whole limb
to be taken off or only the affected part? —

Ampputation occasionally required for — specific tumors — Phage-
tic Ulcers — Compound fractures and especially Com-
 pound Dislocations —

Dr Monday Mc Clellan
Aug 23rd 1826

Hernia, dangerous the delay - every part of the contents
of the abdomen may protrude in different regions -

Umbilical Hernia of the Infantile and that of Adults &c

Infantile always a swelling in the centre of the umbilical chord
some say always present in the Fetus in Utero - frequently seen
at birth the omentum ~~is not~~ ^{is} yellow and is not protruded
but different in adults where the omentum besides it is
not exactly in the Umbilical but in the Linea Alba and
the figure will be oval - but in the Fetus it is an ~~is~~ circular
one, and in adults the Omentum always present or per-
haps may be of a fatty kind known to the French - no
difficulty in reducing an infantile Hernia seldom requiring an
operation - but in

Adults there will be colic, indigestion and other trouble
some symptoms from projections of the Omentum also
there are less severe when these fatty tumors are present as
these are connected with the Omentum - these last
more common to old corpulent persons - may happen
to spare persons - the Omentum may generally be reduced
by the fingers - but the fatty tumors more difficult to re-
duce it - if it cannot be reduced must be supported by
stays and belts, tapes &c the trap of Dr H. will of
a work preferable - but instruments as traps &c not to be used
unless you have reduced the hernia - but use light pressure
by belts or tapes &c and may be absorbed, perhaps in this way

Tuesday January 24th

An Operation after recovering an Infantile Hernia & a double armed needle to be passed through the artery and both tied and an adhesion will take place or tie it up like the mouth of a sack another way but either of these two modes seldom ^{may} require a ~~be~~ ligature both of these may be done as there is noomentum in the neck not so tight as to slough the part but only cause adhesions

Inguinal Hernia - generally enclosed in within the substance of the Spermatic Chord - the bands of Muscles called collateral bands of Utrin slow are the cause of Stricture - ~~the~~ ^{curved or} Hernia's differ in regard to their contents Femoral Hernia does not accompany the chord but lies on the thigh emerging there under Poupart's Ligament

Inguinal Hernia of different kinds from their state first when in the groin is called ^{Bulbocele or} Inguinal - when in the Scrotum called scrotal Hernia - The Hernia may be strangulated as soon as it passes through the upper ring and will be a small button like tumor has been called Concealed Inguinal Hernia - When there is a great deal of colic you should always enquire and examine in every Case - After a reduction of the Intestine you may have a Typhilitis of the Intestine and Salivation the only Cure - sometimes they continue the whole length of the Chord and called an Oblique or Indirect Inguinal Hernia and here it has the Spermatic artery behind it but when it passes down directly the artery will be hind and in the last does not pass through both rings - but in the other ~~does not~~ passes through both the direct only through the external

upturing the Fascia transversalis between the external ring and os pubis and then through the external ring called Ventro-Inguinal ring and is the direct Hernia ^{the artery on the outside} the natural or oblique descent follows the spermatic chord which passes through both rings and the epigastric artery will be on the inside of the tunica and between the pubis, not so likely to be strangled. In the direct descent will pass over ^{and before oral the side} the chord and cremaster and separating as in the indirect -

Inguinal Hernia

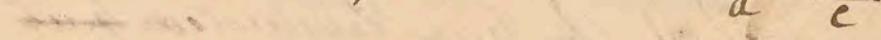
The Congenital, occurs at birth and passes down into ^{round it} the Tunica vaginalis which does not entirely sur ^{but behind it} the intestine lies before the testis. (of the tunica) The adult ^{does not allow this} - as the neck ^{become} in contact and close up the aperture by which the intestine testicle passed in

Congnital ing.: Hernia sometimes the intestine has descended and the testicle has not descended another kind of Hernia and there frequently in after life the testicles endeavour to pass down and form strangulations.

The Incised Congenital Inguinal Hernia - where the peritoneum ^{into the Tunica vaginalis} passes down before the ~~down~~ intestine and one where the testes has passed down before - and where it has not passed ~~down~~

Thursday Janry 26th 1826

Contents of these Hernia of have little constricted parts independent of the true constricted part - May be constricted at the mouth of the cavity of the sack either at the neck or lower down or it may be above the real structure also and in this way the part of the sack which was at the abdominal ring and there constricted might return into the abdominal part.

Of Femoral or Crural Hernia — which passes out under Poupart's Ligament — sometimes the cellular substance is ruptured and then the sac is not so compact with the vesicle, and will ^{not} pass down the thigh — ~~and best~~ when the cellular substance is ~~not~~ ruptured it lies between the vesicle and the pubis and might be mistaken for Inguinal Hernia. But if it is found down by the facia of the chord it will pass down the thigh — Femoral Hernia nearly always happens to the female, but Inguinal to the male — as the space under Poupart's Ligament is larger in the female on acc^t. of the formation of the pelvis. It may also be distinguished by examination of the parts ~~through which~~ ^{through which} Crural Hernia ^{Inguinal Hernia} Internal Crural ring and Internal abdominal ring, and they are separated by Poupart's Ligaments — the anterior part — the Hernia passing out under Poupart's ligament and facia lata of the thigh has a ^{crural} ~~similar~~ edge and is the external ^{ring} of Femoral Hernia — the outer part of this aperture is filled up by vesicle — and there is a space ^{or canal} between those two Crural rings and all these resemble the ~~inguinal~~ abdominal rings and canal, but the two Crural rings are much more oblique than the abdominal rings & canal 

W. H. Clellan

Under the skin the first is a fascia of the abdomen sometimes thicker other times thinner this is not a true fascia but a dense cellular membrane — this covers the Lymphatic glands of the groins. Aneurisms, Prost. abscesses, enlarged glands, Hernia, ulcers of the part; may easily be mistaken for each other these to be carefully distinguished — Anatomy of Inguinal Hernia — The fascia of the ext. ob. form the external abdominal and the chord passes through — When the bar of bone is at the ~~abdominal~~ external ob. ring the bands of Winslow to be avoided — the internal ob. ring under the external ob. muscle also the ~~the~~ internal ob. mus. and Trans. covers the ~~upper~~ part of the ring — the two ring generally the cause of stricture ^{the loop across the two internal} but the muscles over the rings may assist — the fascia transversalis lines the inside of the Trans. muscle and in this is the internal ring near the Spinous process — the Epigastric artery passes through the inner part of the ring and when the Hernia passes through this always carry the artery before it — if the Hernia be complete the stricture will almost always be at the external ring — Hernia of long standing the two rings nearly and sometimes quite in contact — In Ventral Inguinal Hernia the Epigastric artery will be on the ~~inner~~ outside and here the Rectus muscle may cause the stricture, + Cremaster Mus. is given of from ~~from~~ ^{part} of the Sartorius and meets the Chord in an angle just as it passes out and in the Oblique descent the Cremaster Mus. will be before the sack and according to this the Cremaster Mus. will be immediately under the external cellular fascia — the vessels ^{of the Chord} will be on opposite sides of the sack — but will not divide the chord itself or the Cremaster Mus. from the chord in the Ventral Inguinal Hernia, but the chord may be before the sack

If any of the large Intestine ^{come down} & the Peritoneum will not shew
a Herniary Sack, — but may be behind the intestine — cut on the small intestine there will be
a loose sack covering the intestine being the Peritoneum

for Inguinal Hernia Friday Jan 27 1826

Treatment, when no operation is required — the symptoms
are Colic, pain, indigestion &c and this will continue
until it is reduced or pressure is removed & by this the
blood will be congested, this may happen even when there
is no strangury — or a congestion of the alimentary mass
in the small intestine protruded — the cause as generally
a greater quantity of blood, wind or mass forced into
the sack and not stricture of the rings as generally
thought to be — There is a irreducible Hernia
which is not strangulated, but where it cannot be
reduced by the patient or Physician, this will generally
be Coccah &c but it may easily become strangulated
and very liable to occur from local or generally irritation apt
to occur in the right groin — these may be overcome by
taking away the irritation by blood letting — injections, lax-
atives & rest — an operation for this only palliative
and only allows the Hernia to return — An Intestine
known by the gurgling sound of water &c — If the Omentum
known by the sensations of acoy and more solid — if the
bladder be protruded known when the bladder is empti-
ed — first know the nature of the Hernia and then
will easily know how to reduce it — more easily done
by bolstering up the shoulders and hips — shake the
thigh and the patient to make no exertion whatever
and slight pressure and the mode in accordance to
the anatomy of the part — Femoral Hernia also reduce
ed according to the kind of Hernia, if it rises above four

Treatment for Strangulated Hernia

1st the Taxis lightly

2nd Bleeding while sitting to fainting

3rd Laxative Enema

4th An Anodyne injection 60 grs Fraspiuntill irritations of the

5 Tobacco Injections have recommended

6th Application to the parts

Keeping at the same time the parts bolstered up without any exertions on the part of the patient.

Keeping down inflammation of bleeding

downwards then upwards, laxatives, ^{cautious} blood letting to syncope (ury) -) - and this will be producing or sitting - this the best this the best of all that can untill irritations of the a time apply give Nause - and apply cold wet cloths irritations - or put the a relaxed ~~water~~ posture. may be attended to done mortification may be induced. rum may be given when fear affects has been used as an in the rectum but is apt to be too great may pro- it may be of great use ed all this not succeed then do not wait longer than a the commencement of the the Hernia come. Mechani

cal apparatus to be applied as a compress & bandage or Truss (of Dr Hull) the very best - the fore pad of the Truss to be so placed as to cover both rings and the abdominal canal some soft old linen to be placed between the pad & skin to absorb the perspiration - all unnatural adhesions of the intestine to be separated - also if two or more different substances happen down in the sack should adhere to each other they are carefully to be separated before it is returned.

If any of the large Intestines
a Hernia ^{but may be behind the} ~~but~~ ^{come down} ~~Position even~~ will not show
a loose sack covering the

~~for inguinal Hernia~~
Treatment, where no op-

are colic pains induced
until it is reduced or if
blood will be congested
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in the small Intestines
ally a greater quantity of
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and only allows the Hernia
Known by the gurgling so
Known by the sensations

bladder be protruded Known when the bladder is empti-
ed — first know the nature of the Hernia and then
will easily know how to reduce it — more easily done
by bolstering up the shoulders and hips — slake the
thigh and the patient to make no exertion whatever
and slight pressure and the mode in accordance to
the anatomy of the part — Femoral Hernia also redu-
ced according to the kind of Hernia, if it rises above four

John Schrack
My
ated
adapt
by
soft
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tissue
mentum
the

parts ligament; prepare first downwards then upwards.
if this will not do - depend on ^{carceral} laxatives, blood letting to syncope
Cathartics of an active kind do injury -) - And this will be produced
earlier by the patient standing or sitting - this the best
if the patient can bear it - this the best of all that can
be done and to be repeated until irritations of the
parts is taken off - at the same time ~~apply~~ give nause
ating dose of ant. in water - and apply cold wet cloths
to the parts or emollient fomentations - or put the
patient in a warm bath in a relaxed ~~water~~ posture.

If these do not do then the following ~~must be attended to~~ ^{and irritations &c} done
so often using the tapis is wrong mortification may be induced.
It ~~ever~~ happens sometimes and Opium may be given when fear affects
the patient too much. — ~~Tobacco~~ has been used as an
infection or by smoke thrown up the rectum but is apt to
produce prostration and should it be too great may pro-
duce death — externally applied it may be of great use
in Urinary diseases — should all this not succeed then
operate immediately at least do not wait longer than a
day two or three at most after the commencement of the
strangury — After reducing the Hernia some mechanism
cal apparatus to be applied as a compress & bandage or Truss
(of Dr Hull) the ~~very~~ best — the face pad of the Truss to be so
placed as to cover both rings and the abdominal canal
some soft old linen to be placed between the pad & skin to
absorb the perspiration — all unnatural adhesions of the
intestine to be separated — also if two or more different
substances hang down in the sack should adhere to each other
they are carefully to be separated before it is returned.

Saturday, January 28th 1826

The Operation for Lithotomy - the Lateral operation, as now
practiced here - the staf large - knife instead of the forceps.

Monday, January 30th

The operation not so successful as might be wished for
as one of 4 or 5 generally dies taking it in general -

Different periods of life has great effect in the success of the
operation, for instance, more successful in youth or childhood,
as then the incision will not be required to be so deep or long.
More dangerous in after life than in the prime, as then
in the decline the glands will enlarge with many other cir-
cumstances -

Mode of operation has a great effect on the success - also
the total situation and relative magnitude of the parts - as
if the bladder is empty there will be no lower fundus - or
also if the rectum is full it may be cut - if the
bladder is distended by urine it will generally not be
a more successful operation this not being so much
danger -

Also the the faucia or suspensory ligament
will be affected by the bladder being filled or empty - the
vena cava & afferent veins pass through the constrictions of this
faucia where it meets over the bladder and there is a dan-
ger of drowning these afferent veins and probably this may
be the cause of the sudden death from the operation as they
are often varicoso and consequently the flow of blood is very
great and all pressure is taken off the heart - & to
prevent this the staf must not be too much curved -

the manner of conducting the forceps to be attended to be a teal-
ful on a straight director the best - N.B. The muscle of the levator
ani cover the prostate gland and some of the fibers to be cut
in particular if not attended to the forceps cannot be introduced

Mr. M^r Clellan

Monday January 30th 1826

The Sansomian Operation

By Cutting immediately downwards to

the rectum on the staff; immediately between vesicular ducts
but now is not much attended —

It has also been proposed to cut immediately upwards to
no danger of cutting the vesicular vessels &c but not
no much attended to, being modifications of the low operation.

The High Operation; first named by Gracce — formerly attributed
to Cheseldon notwithstanding — they that is done ~~done~~ prevented
the discharge of the urine for 24 hours of which the
Peritoneum was carried up and allowed room for the
the incision — but then the urine will pass into the
Cavity of the abdomen will ulcerate the parts and often
prove fatal — Cheseldon evacuated the urine and distended
the bladder by barley water by this the danger greatly obviated
— but here the coats of the bladder was paralysed by the great tension
coming great difficulty and by the aspiration irritation ulceration
suppuration follows — but he at last followed the low operation
for reasons not known —

The High Operation as now Practiced, is perhaps the best — and dif-
fers in this, that the bladder is emptied by an artifice
opening into the membranous portion of the Rectum, ~~that~~ this
was practised by Gracce — but this not required — then intro-
duce a ^{containing a stilet} ~~canula~~ be pumped the ~~the~~ bladder up and of the peri-
toneum with it and then extend the incision and take
out the stone — and generally is attended by considerable
succe^s — and recommended by Dr. M^r Clellan without
too opening and without the ^{See 3rd page next} canula containing a knife —

Monday Feby 13th

The Symptoms of Calculi - All the symptoms of Calculi may occur without any Calculi to be found -
The symptoms - are Indigestion, flaccidity, acidity of the stomach the perspiration much deranged - and then the derangement of the urinary organs. a smarting at the glands penis - and the patient will pull at the prepuce and some say this is a sure sign of stone - or smarting or bloody urine also said a sure criterion - All these however are not certain - there is also a sudden stopping of the urine and even this might be fallacious, it might be closed by the 3rd lobe of the prostate gland or by a sudden spasm of the muscles of the urethra - an irritable condition of the rectum is also characteristic of this disease - pains shooting up in the side and abdomen all are as frequently present when there is no as when there is - being caused by a functional derangement of the nervous and other systems or a derangement of the bladder or urethra owing to an affection of the bladder stomach -

If from an irritability of the urethra from gonorrhœa - the same remedies for stricture of the canal and treated by occasionally introducing a Booge or introduce a strong injection of Lunar Caustic gr x to 3ij of water - avoiding all stimulating diet and drinks - free exercise - &c
Where it depends on derangement of the alimentary canal of 2 kinds One where the urine is loaded and at the same time it is very offensive ^{and sour} - the other is red and not so offensive - the first to treated by mineral acids after cleansing the canal - The latter form to be treated on opposite plan - at the same time very low ~~and~~ diet occasionally bitters - The first by Nitroous acid 3ʒ - Gum arab. sugar - and 3vij of water to be continued after there is relief to the disease

at the same time alternatives - The first condition
is called The Lithic Acid state and the other
the Alkaline - In these first the ^{or phosphatic} disease com-
mences in the Kidneys - The Alkalotic in all
the living membrane of the urinary organs -
The Stones are also ~~of~~ ^{owing} to these two kinds, but
are connected with a disarrangement of Chylopoetic
Viscera -

Tuesday Feby 14

The foregoing symptoms, are often the precursors of a
Calculus in the bladder and may last a number of years and
they may even sometimes be removed by attention to diet &c
~~operations~~ however none of this irritability of bladder will be
found and the Calculi will form imprefectable -
and will always be of one of the two foregoing kinds -

The Alkalotic kind the most difficult to treat by far -

The local affections of the Urethra & Lithic Acid, easier
there being 3 kinds as just above

Hydrocephalus - very difficult to cure when the patient shall
suppose he is affected with Calculi, and they will deceive their
Physician - this general and Constitutional disease is a
singular one - sometimes in one place then in another - The
will eat well sleep well, but always complaining of something.
alterative and change of situation &c - (see Moxahal
Pall) - sometimes chronic & acute - the urine is pale, is
not caused by disarrangement of the stomach - &c the
skin altered and blotched &c -

Wednesday Feby 15

The introduction of the Catheter - required for ~~#~~ over retention
of the Urine - the only difficulty will be in the Perineum
which will be spasm of the muscles of the part - use no force,
until you relieve the spasm by other means - as blood letting
till slight fainting - ^{inj} ~~inj~~ injections & laxatives next as Castor Oil - warm
bath the best - And these will generally succeed - if these fail however then

give Opium iiij to vijrs with as much Calomel the quantity of Opium to be large — The Ext of Belladonna prepared by some if it is good might be useful in 3 to 5 grs with Calomel — if you give too much you salivate — Last of all is Tobacco leaf 3ij to 1 pint an 3s infected occasionally — This Retention caused by Injuries of the Spine but seldom require so severe remedies — And is a Paralysis of the bladder — Occasionally you will not require any instruments — Silver Catheter generally the best in these cases but always have several different kinds of instruments and of different shapes — Large instruments pass easier than small ones —

High operation of Dr McClellan no instruments, but a scalpel forceps, forefinger Catheter, & thread of silk in a bowl of water below — In females a female catheter, these to remain after the operation for some time, and is very analogous to Taking up the Iliac Artery — As now practised — 1st make an incision precisely in the direction of the fibers of the External oblique either higher or lower, above the Anterior process of the Blauth — after dividing the fibers — And those of the other muscles and expose the Peritoneum — Then use the fingers only and push up the Peritoneum and the artery will be seen, after you can apply the ligature by the needle & forceps of Dr Physick — Do not touch the artery with the finger or the handle of the knife or you must apply two ligatures and divide the artery nor pull the artery when you tie — the ligature passes out below the peritoneum

Dr W. C. Ellan
Thursday Feby

[1826 Feb. 16?]

Retention of the Urine by Spasmodic Stricture of the Urethra,
Caused by tumors in the Rectum - Gonorrhœa &c

Real Stricture or Permanent Stricture - does not entirely prevent
the flow of urine and may be always partially thrown out only
when there shall be a spasmodic action and this again
requires the alleviating measure - the other or former
requires radical plan -

Palliatives - are such as shall divert away the blood from the
parts by blood letting, laxatives, Clothing, diet, send your pa-
tient to warm climate in winter as all change of
weather affect this disease more than any other - such
medicine and diet as cause a watery urine as vegetable
diet - always deny all shortened, pastry, hot bread &c and
even by these means you may expect much -

Small doses of Magn: a tea-spoonful 3 times a day,
with the alkalies every time water - (there however when
the Phosphatic diathesis is not present) - all these
and at the same time not too much exercise especially
in summer - to these you may give Carol tea - parley
- tea &c as adjuvant to cause a watery flow of urine -

If the Phosphatic diathesis is present - Use the mineral
Acids - Muriat. Tinct of Iron - Barks &c might be given
bather the parts at rising - shower bath - After these Use
The Radical Remedies - excite an absorption of the mucous effus-
ed in the Urethra - sometimes you have a bridle across
the canal or sometimes you have warty tumors in
different parts - and these will require cutting or burning -

A stricture at the ~~the~~ very anterior extremity of the glands
penis - requires to be cut by a straight pointed bistury -

The most frequent situation of a stricture is at the very
seat of gonorrhœa viz about an inch back from
the glands penis - And requires a catheter to be
introduced every day or two and no particular kind
of instrument to be used - It is at the bulb and
at the membranous portion of the urethra that re-
quires a great care in the selection of the kind of the
~~boogies~~ Catheters - These supposed by Dr. Mr. Clegg to be less
frequent than generally by some practitioners think
you may find an obstruction frequently and always
attend to diet, laxatives &c for some time before
decide on a stricture being there - especially if ^{you} shall
have already passed a stricture, and in these cases
it might be spasm occasionally - Wax boogies
or flexible catheters here after prove useful - you
may do more harm with a metallic tube if you
do not understand the anatomy of the parts well -
the gum elastic catheters are always to be kept bent -
the wax boogie will show you the size and situation of the
stricture - Oils to lubricate the boogie should be animal
as Lard &c - Do not use too small metallic instru-
ments as they will bend too much - the moment
all irritation from the introduction of one to boogie
is the proper time for the introduction of another
time - these with diet &c - will generally
be sufficient - although in some cases the patient will
complain much from the first few introductions -

It sometimes happens however that the most violent (as some say) that we must use a ~~hot~~ caudle containing a knife, this may sometimes do, but generally it is better to introduce a catheter and allow it to remain several days at a time confining them at the same time bed and the other requisite mentioned before — the caustic only good for destroying the morbid irritability and use the lunar caustic in ^{10 to 40 grs to 3} j. never use it to burn out the stricture as practiced by some — not much advantage from blisters &c cold & warm bathings might be of use, used according circumstances —

Retention of Urine in old persons is generally caused by a disease of the prostrate glands and they will prevent the entrance of the bogue & catheter — the enlargement of the 3rd lobe is generally the cause — the instrument or catheter can only be introduced by bending it very much and pass over it — sometimes one or other of the lateral glands and then the instruments to bent accordingly — Friday Feby 17th

Diseases of the Testicle — are first a vicarous enlargement of the spermatic veins — producing tumors in the posterior portion of the testicle also rising higher up — giving some dull pain for hours — owing to too great quantity of blood in the part ^{and is always} in the left side — is very common only wash ^{cold water} the part every morning ^{or} ^{or} ^{soften} support the parts by bags or tight drawers — a very simple disease feels like a map of worms — and you may see the blue vein. dont drink much wine nor dont eat much

The next in frequency is enlargement from an injury.

Seplete - bleed purgatives of Heyalagoze kind - keep him on his back & employated spts or - serofulous enlargements and ulcerations require nothing but the plan of treatment for Scrof.

Chronic Tumour - in different situation but all of no dangerous kind - only are a trifle wch & never result in harm - order diet Bluehill, Sarsaparilla, friction - suspension & a boggy light & is generally sufficient mett Hornia Humeralis -

It that which arises from Gonorrhœa - to be treated as if it had arose from any other cause - If the pains be very severe - Bleed - leech - laxatives - low diet, patient on his back - a large emollient poultice the very best. Sometimes they will return again & again then smear the testicle with Mercurial Oint: Camph: Siccous powder 6 to 10 grs with 3 or 4 grs Calomil at night - Sometimes the epididymy will always remain larger than common -

Sarco Celle require a regular course of bogging and always attend to the connection between the Uterus & serotum as smearing the bogie with mercurial Ointment

Cancerous - Tumors or an Increase of a sarcomatous tumor are always to be cut off as it may be of a malignant nature where two specific diseases are the only ones that demand ^{extirpation!}

Hydro-Celle - of common Anasarca Hydrocele - and is only in the skin - & easily managed if not connected with common dropsy nature generally cures it shower bath & tonics may assist - duries purgatives &c

Glucine Hydrocele - is in the cavity of Tunica vaginalis there are various ~~th~~ as there are several sack sometimes connected and all these must be opened and they are called Glucine Hydrocele - make an incision and expect toine water and allow it to remain sometimes then take it out this will only answer for pure simple Hydrocele

Dr McClellan

For if there be Hydatides or a number of sacks requiring a larger opening ~~as~~ but only tapping with a lancet sometimes produce great inflammation consequently the above plan will be hazardous — The best is by making an incision and introducing a bovie or ~~spat~~ a deton through the rectum — Instead of this Dr McClellan introduced a piece of linen rag and allowed it to remain — drawing it out gradually The Deton is perhaps the best — introducing it at the lower part and carry it out at the upper part & tie together the two ends of the strings — this may be passed through all the sacks — & and use blanda gels —

Yester Febry 19th

Tapping the Bladder — Where it cannot be done by the Urethra it is to be done below and above as recommended for Lithotomy when the third lobe is enormously enlarged, I would prefer the bladder above the pubis and introduce a trochar and wire in for two or 3 days and then introduce a short canula.

Performing it, through the rectum is more difficult

Diseases of the Rectum — Hemorrhoidal of 2 kinds Vascular & Muscular — The former caused by constipation and the last not from the same cause —

Treatment — in the Vascular by laxatives, diet low, cold ablation several times a day is the very best —

The Muscular tumors sometimes become very large even that they cannot be reduced into the rectum — they must be extirpated by ligatures or by the knife and not often much hemorrhage less simple than generally supposed, as they are to be drawn out and then to be cut off

A frequent disease is the rectum becoming dilated and the upper part falls down into it - and the stools will be long and difficult and all the sensations of stricture will be felt - the only cure is laxatives diet - laxatives, as Sulphur &c - and above all the hourly use of injections of Cold water or other cold -

There may be a scirrhoucity of the rectum in old age causing strictures & requires laxatives - like mush & molasses, stewed prunes - if Cancerous cicuta injections and an introduction of a bogue -

Fistula in Ano - and abscesses probably always caused by many or all of the diseases just before mention - ed - And Fistulas are of a great variety and no treatment will be of use, unless you first reduce the cause - as strictures in the anus be a fish bone or any foreign body might pass out and cause the disease - or it may be caused by an affection of the Constitution and inflammation extending and causing the disease -

We have abscesses of this kind from debauched Constitution or from that state of the constitution which cause or have Phthisis, Asthma, gout, Rheumatism. When some say we ought not to operate under such circumstances and again recommend operating under every circumstance or constitutional disease - This subject is involved in great difficulty -

If however the fistula cause irritation or anything else disagreeable then cure it and form an issue in some place if required -

Still if it be chronic and there be a tendency to Phthisis &c and the fistula is not inconvenient then do not operate for the disease act at an issue which would better be left alone - also caused by Phlegmonous mycetes

Different varieties of Fistula as where there is no external opening Called Blind Fistula - And here ^{faces} they will extrude in the loose cellular substance causing great pain, a horrid consequence may be follow'd (as related) if not timely opened - You may find the fluctuation in the abscess before any opening is formed then open and you cure the disease -

Where the Opening is external, and may maybe cured if the opening be freely opened in time and will not require the operation for Fistula - Still however we have often abscesses extending high up and is called an incomplete Fistula - they are very difficult to cure and require a full operation and here the sharp pointed bistoury must be used - after the operation put a small quantity of dry lint between the lips repeated every day.

Superficial Fistula. often extend to receivea Seminalis and cause such great desire for a venereal appetite only to be relieved by an operation for the fistula -

The patient should live on a low diet altogether on the disease always will return

Saturday Feby 18th

Abcesses often or at least may happen in the cavity of the Rectum and the bladder will appear floating in the pus of the abscess - this sometimes breaks in the abdomen corroding the Peritoneum and intestines - Peritonitis - Peritoneal abscesses often happen in the abdomen

Monday Feby 20th

Nephritic Inflammation - If plethora bleed - hip bath - Opium & nippetwo - enema - mild laxatives - 1pt Tincture 8 gts &c

Wounds of the Eye — Foreign bodies in the eye — to be removed (if they be steel, glass &c) by producing a contraction of the pupil & keep the other eye open and look obliquely and you will see it lying in a little pit and then remove it by a large curved needle with the side of the needle — if however it has in it you must introduce the point of the instrument in under the foreign body but can then easily remove it — you must therefore distinguish the manner the foreign body is inserted — and then act as above — If you do not extract it — do not bleed & give laxatives &c as recommended as it will exacerbate inflammation — but touch it with the pith of Sassafras — Whether you extract or no keep the eye cool from light and the use of the youth of sassafras —

Small hairs, growing into the eye produce frequently the inflammations of the eye and these you may relieve by extracting these hairs — generally found in the internal Canthus of the eye —

Watery Excrements — in the parts, produce great irritation, then to be cut out and be touched with lunar Caustic, Also Watry Excrements do not allow the lunar caustic over the whole eye, and then use the pith of Sassafras before closing the eye —

Thickening of the Barbillula Gaciamalis — or the parts having hairs growing out — and keep up inflammation — laxatives, removing the hairs of this does not so remove a part of the Comuncto —

Lippitudo or destruction of the root of the Eye lashes — do not use any whisks — except Milk & Water — depend upon Blue Pill every night and a Detox in the back of the neck week — and always attend to this

Obstructions of the lacrimal duct — or tumors of the parts, the parts to be cut open and introduce the point of lunar Caustic, or cut it out entirely if you do it on the external surface, sometimes they will go away by Laxatives as Sennet powder & vegetable diet — or Champhorated ointment — or use Avied gall bladder diluted with vinegar to the consistence of ~~water~~ ^{mucilage} every night or at going to bed — Never use leeches in the eye lids only leech the temples —

Obstructions of the lacrimal duct — leech — blister, blood-letting Sulphur 9*ij* to 3*ij* water — laxatives — Pain in the eye from reading depend on alteratives — changes of habit — depend not on local applica-

Dr McClellan.
Monday Feby 20th

Here an Inflammation of the exterior part of the conjunctiva
Infants often happen a few days or weeks after birth - and then
is very similar to Gonorrhœal inflammation, and there might be
contracted by passing through the pelvis - And do arise from
females having Gonorrhœa or Fluor albus - this disease
will suppurate & are very severe - are to be treated alike -
Never apply leeches or lead water - but apply Stimulants as
Linct. of Camphor not to be allowed to pass between the lids - also
fomenting the eyes three or four times a half an hour with
milk & water then apply the Camphor at the same
time the following may be used with advantage -
grj Sulp Zinc grj Lead water Rose 3ij - Also Sulphate
of Copper grs to 3ij water - solution of lunar caustic sufficient
to change the colour of the water & may be strengthened - these
also good for the effeclating process of the conjunctiva from Gonor-
rhœa matter being carried to the eye; and here the lunar caustic
the only remedy - in Children give Mag: - blister on the neck or
temple - this disease in suppuration will lay open the Cornea
and an opacity will follow - lead water will always produce
an opacity as the lead is decomposed -

Contagious Ophthalmia - common and often found in Thrombosis
It is suppurative & a peculiar disposition to form warts except
- ces on the eye or the lining of the lids - and the disease is kept
up by warts which are to be cut off and are lunar caustic - by
wearing with a camel hair pencil it produces inflammation and pro-
duces a new action - also setons - if inflammation runs too
high use colo application

Scrofulous Ophthalmia - the most frequent of all diseases of the eye
you will find other symptoms present of Scrofula - abdomen turbid
stools black - the eye will be very irritable and relieved by low
diet &c - you will see small pimpls and ulcers on the conjun-
tiva - sometimes the ulcers are very deep - to treat by Altrative
and purgatives and this the only plan

Or Blue Pill or Corrosive ^{sub} on the alternative
turn & manna the ~~set~~ —

the Sarsaparilla after 2 or 3 weeks — given in Tea —

Friction with the ~~hot~~ towel and salt — every morning —
farinaceous diet —

If there do not do use next the seton —

Emetics occasionally Specae or Aut.

Watery solution of Opium 8 or 10 grs to 3 fl. - Copper Zinc
bark pitch of Sassafras — first burne Caustic to the ulcer
If the skin blisters or preturdes do not cut or press it back — but
apply the pitch of Sassafras and apply caustic every day and
thrustly destroy — Umbelladonna to keep open the cornica

Sunday Feby 21st

General Inflammation or pain from sewing or reading being
an irritability are to be treated by change of air — altera-
tives &c diet — Antiphlogistic and general plans now
used by bleeding & warm bath —

Where cloughing and pain come on suddenly and they
lose their sight immediatey — depends on an in-
flammation ~~at~~ within the eye and can be reduced, exter-
nally — Blood letting to the greatest extent — Antiphlo-
gistic — cupping &c as before — local application
to either cold or warm as comfort shall be given.
~~place~~ pledges of linen in water renewed as often as
they are dry — to be placed over all the surrounding
parts — poultices never to remain on too long

McClellan Feb 21st

The alarm and pouliee only when there is a relaxed state of the conjunctiva — It may do good in serofulous and edematous inflammation to remove them for a night then use stimulants — as Camphor.

Inflammations of the lacrimal and deep seated — which does not effect the external parts sometimes from cold called Adhesive ~~of~~ Ophthalmia — connected with Rheumatism in other parts and the general symptoms of Rheumatism as the tongue white fur mount — stomach & bowels regular — pulse irritated — head tense, no luminous &c — the appearance of the eye itself will assist you — the inflammation confined to the sclerotica Iris & lens — the pupil immovable — the vessels of the sclerotica run in straight lines and not vermicular as in ~~other parts~~ of the conjunctiva — these vessels run to and in the corneal itself — It terminates in adhesive inflammation of the Iris — you will see small particles of pus — the pupil had attracted adhesion and cannot be dilated — sometimes extends to the chorioid coat — retina &c

Treated as Rheumatism by bleeding, largely and rapidly, leech the temple — then evacuate the bowels — Blister, fomentation warm applications — endeavour to determine to the skin as in Rheumatism — then Opiates — the vinous Galchicum 50 gts with magnesia is the very best remedy, several times a day — and will always relieve general Rheumatism of the joints

Ophthalmia of the venereal disease - as of the scaly, phagastic &c — is very similar to the former Ophthalmia — not certain whether from the disease or from the remedies — It occurs where no Mercury has been used — A disease similar to this from long Mercurial Course — and probably ~~is~~ contracted from cold — but this cannot be located as the Phlegmatic kind as bleeding & evacuants as they always do harm — The best plan is to place the patient on the rapid use of Mercury — with ~~some~~ Belladonna & Stramonium to dilate the pupil — and then are the two great remedies — and every thing else is only assistance — if fever bleed — &c — Haemating remedies always assist the effects of mercurial very much — give Calomel with Antimony and you may do it in several days — of Cal: gr: iij. Ant: Powder gr: iiiij every 4 hours — Cup the temples — letons behind the neck &c

You will generally remove the disease in 4 or 5 weeks — Continue the Stramonium for several months

Opacity of the Cornea — caused by various causes — common to old persons from no cause whatever — to be treated according to the cause — It has ~~not~~ happened in young persons from no cause whatever where it takes on an ~~opposite~~ action — There is another where it is caused by Ulceration and may be removed although you cannot remove the cicatrix — which in a majority of cases happen — Sometimes a cataract or ~~cataract~~ happen from inflammation or injuries &c — The Treatment — by such means as will exert an absorption of the opacity — If it has been of short duration you may still have greater hope — if it has been of long standing you ~~will~~ have but little hope or virtue at all.

it
You may try if have existed several months or even two
years &c — (you will remove this deposition of lymph
by Stimulants &c as some say) (diminishing the circulation
as may be proper to do by bleeding leeching purging
sets on & and have all done good) the best is to move
in the intermediate & any place as may be required
for instance is there be inflent redness and the vesicles are
large reject the first plan, but act by the second
plan even to divide the vesicles — draw blood to
diminish the vis a tergo — Blister, leech, sets on
the back of the neck — this do for a month or two
then divide the vesicles — first elevated a portion of the
conjunctiva by a small hook and cut it all off by
the scisors — Do not cut down by a knife as some
do — as you will only partially divide the vesicle — but
you may run the knife under the vesicle and cut
a large orifice so that you do not have an eczema.
The scarification knife may be of use to scratch on the
inside of the lid — alternatives — low diet of Purging
bleeding &c — Particularly alternatives if there be scrof-
ulosis — The Opacity augments or sometimes
is kept up by the Iris adheing to the Cornea, and
then cut off the supply of blood by introducing a curved
needle — this circumstance not at all attended by
physicians generally — always take care to establish
the healthy functions of the skin —
Where there is no surrounding vascularity but opacity
then stimulants slight fomentation — friction — change
of diet — journys &c — also purgatives may
do good locally none are specific — Sulph Zinc qrs
to 3ʒ water corrosive sub. gr 1/4 or leeches &c

If the eyes are agglutinated in the morning use lotion
Oint. Zi Lard ^{zj} to anoint the eye on going to bed.
And an Altringer in the day

Taricium - a membranous growth or fungous or fat, may
at the inner ^{canthus} margin of the eye exude by the pressure
of the two lids on the eye - and a vascularity of irri-
tation of this is the disease - hook it up and cut it
away and you have a cure with Antiphlogistic and col-
liriates - If it be a true ranicum where the vessels
are running together without this mass then cut them
out by a hook and knife or by a catarack knife
but do not cut away too much of the substance or
you cut the Caunegla laecharialis, &c -

Operation for Making the Artificial Pupil - are there
are three different kinds - 1st where there is
a small pupil - introduce a small knife
(as recommended by Cheselden) through behind the Cornea

2nd the operation of Scapha - the iris is torn of and pushed
away -

3 - Introduce a hook ~~and~~ through the cornea and hook up
the Iris and cut it off and allow the remainder to
retract - the operation of Wenayell -

Which of these operations to be performed -

If the crystalline lens are sound do not interfere
with the lens - Do not do it by Cheselden - and his
only in cataract -

If the interior of the eye is sound then the last
operation for an opacity of the cornea,

Dr McCollum

Tuesday Feby 21st

Here the patient will only see obliquely, you
may and may ~~do~~ relieve of by stramium —

But the best of all is an operation especially when
a pock of small pox shall happen in the center of the
Cornea — Also from wounds — the pupil will dilate
and the Iris will be sound — there may be at the
same an opacity of the lens —

Make a puncture near the edge of the Cornea by a
knife sufficient to introduce your hook into the pupil
through the anterior chamber — then pull the
hook out and Iris with it and cut it off by a pair
of curved sissors — And push the rest back — this
is the last operation —

The Operation of Seapa — All the Cornea but a ^{small portion of} margin
of it is left opaque — introduce the needle behind
the Iris and ~~a~~ ^{tear} it away — perhaps even here the 3rd
operation is the best — and is a dangerous operation.
and the disease will return — or perhaps even total blinds-
ness might follow —

Thursday Feby 23rd

Dilatation of the Pupil of which the best of is — with a cornea
knife — about a margin of the Iris obliquely through the cornea
make a puncture large enough to carry a hook through
avoid ~~the~~ the hook touching the cornea and lens — seize the
margin of the Iris and draw it out a small fold
of it — and cut out as much as may be required, then
there will be no danger of ~~it~~ it closing again by inflam-

Icarpa's operation does more violence to the eye and appears not to be successful — — it is done by tearing away the Iris from the Ciliary — only where the whole of the Cornea is opaque but a small portion of the margin only remaining, is this to be done —

To remove an opaque large Cornea — from great inflammation — — Introduce a Cornea knife in the Cornea — then with hook ^{you} take the Cornea — then with a knife cut it off and may do it without injuring the eye — and is the easiest way of performing the operation — — —

Cataract — of different kinds — At Couching — by introducing a needle behind the pupil and sink the lens — hard lenses cannot be operated on in this, but in all cases it is a bad place —

Extraction — not to be pursued in all cases, best in hard cataract such as happens in old persons — Introduce a knife in the cornea and cut it half through in the form of a flap and to be carried by a hook and moved in different directions, will ~~not~~ do only for a hard cataract ^{as it is so supine}. Adams divides the lens in halves and then divided and broken in fragments and thrown into the anterior chamber of the eye — can only be performed where the cataract is soft — is the most difficult — this is the operation for a soft or membranous cataract — and then use the double edged knife for soft cataract — a needle for a membranous cataract; this operation called Division —

Dr. H^r C. Bellan Feby 23rd

^{called lacerating}
According to the Posterior & Anterior - passed through the
Cornea, not at the edge for fear of the ~~lens~~ Cornea Iris, And
is carried through the pupil, And you desire to ad-
mit the lens to the vitrious humour and the
lens will be wasted away

Posterior more dangerous and inflammation more likely
to follow -

Friday Feby 24th

Of Different Cataract - and the operations to adapted to the
different kinds - - Cataract differ on account of the cause
that produce them. And the age of the individuals -
In youth they are soft - in old age hard -

Recent Cataract from wounds often mem branous -

The Chronic or slow kind in old age it will be hard.
And here the crystalline lens is the seat of the disease
especially if he see better in a dark day &c

If this kind happen to children we know them to be
soft - there are better principles than even
the appearances of the eye themselves -

The Membranous Cataract is situated in the anterior
portion of the capsule of the lens - and in this situation
most of the diseases of the eye happen especially if the
patient be not in the decline of life - caused from
wounds - Ulcers on the Cornea, or small pox - or from causes
that cannot be explained - there may be an affection and
still the lens are not all diseased, here you will see sil-
very whitish spots

Besides the Silvery, there are some muddy and here
the lens may or may not be affected — but those from
Wounds, & scrofula, the lens will be soft or entirely opaque,
disorganized and absorbed — Called cuticular cataract —
From Wounds the Posterior Chamber advances
to the and into the anterior — We have also the Membra-
nous Cataract in the form of
congenital cataract are scrofulous — always operate
immediately and do not leave the patient to grow up.
as the Capsules will become cloudy &c — We sometimes
have found this kind of Cataract to come on in a late age
as at 16 to 26 or more than connected with Scrofulous
diathesis — Common to cooks over a hot fire a long time
— a Sea Captain who looks a long time through a telescope
or Smiths &c often has something of this kind or hard
er — Then we prefer Laxatives operation or you
might extract — And is called the
soft cataract and is intermediate between the hard
and the membranous cataract — You may know
if the lens is present by it ~~being~~ the Iris being convex
&c all these things to be attended

The Hard or Organized cataract — peculiar to old subjects
beyond 40 or 50 years of age — they come on without
any disease or cause and cannot be checked by
any means we know of — sometimes becomes ossified
we seldom have any other disease with it — No treat-
ment will be of any use — unless indicated by some
peculiarity or pain heat &c in the neighbourhood

Do not operate until the cataract is complete

The capsule is perfect - but is to be cut frequently - if not the threads of capsule remaining will become opaque and then they must be drawn away - often however they will be of an ash colour -

Of capsular cataract or the posterior capsule opaque cataract - can be seen easily behind the crystalline lens far back - it is very thin - you must only expect to see a dark hazy appearance far back -

It is generally in combination with amaurosis - therefore the prospect of relief from an operation is rare - notwithstanding you destroy the posterior capsule - and by the operation you mostly will destroy the lens - best cut away all the posterior lens - and anterior also and at the same time destroy the lens - - - Always begin first & carefully & steadily and use Saunders curved needle.

Saturday Takey, -

Amaurosis - of two kinds, Functional and organic

Functional - where there is a great congestion of blood to the neighboring parts - known by heat of the forehead, flushed countenance & and may be cured by antiphlogistic - cupping - general bleeding seton in the back of the neck, low diet & also alteratives

Cigaree Anamosis - Can never or seldom ever be
cured, it generally occurs in old persons, and it
seems useless to attempt any remedy - alternatives
and a variety of other plans have proved un-
availing, But we are not entirely to despair
as we have known cures from this form
of the disease Dr. —